

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			2/2/00
O.I.P.E. CLASSIFIER			2/17
FORMALITY REVIEW	DJS	15183	4/7/00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	1/1/00 10/29/00
2			
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16			
17	✓	✓	✓
18	✓	✓	
19	✓	✓	
20	✓	✓	
21	✓	✓	
22	✓	✓	
23	✓	✓	
24	✓	✓	
25	✓	✓	
26	✓	✓	✓
27	✓	✓	—
28	✓	✓	✓
29	✓	✓	✓
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43	✓	✓	
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45	✓	✓	
46	✓	✓	
47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	1/1/00 10/29/00
52	✓	✓	
53	✓	✓	
54	✓	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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